

APPLICATION FORM - SIGNATURE CERTIFICATE

FOR DGFT (EXPORT / IMPORT)

Application ID: Signature

(For Office Use Only)

PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATORY

More Instructions available at: <http://www.e-mudhra.com/instruction.html>

APPLICANT INFORMATION

LAST NAME FIRST NAME MIDDLE NAME

Date of Birth Gender ☐ Male ☐ Female Nationality Organisation Name Department Address City Pin code State PAN of Applicant Mobile IEC Code Branch Code Email ID Affix recent passport size photograph of the applicant **duly signed across**

CLASS:

☒ DGFT

TYPE:

☒ Signature

VALIDITY:

☐ 1 Year ☐ 2 YearsDOCUMENT PROOF (attested by Bank Manager OR Post Master OR Gazetted Officer(Group 'A' /Group 'B'), against producing the originals)

Proof of Identity (Any one of below)*

(Having applicant photo and Signature, as part of it)

- ☐ Passport.
- ☐ PAN Card of applicant (Mandatory if PAN provided).
- ☐ Driving License.
- ☐ Post Office ID card.
- ☐ Photo ID card issued by the Ministry of Home Affairs of Centre/State Governments.
- ☐ Any Government issued photo ID card bearing the signatures of the individual.
- ☐ Bank Account Passbook containing the photograph and signed by an individual with attestation by the concerned Bank official.

ID Number

Attesting Officer *

☒ Self attested copy of ID Card/Contact details of attesting officer.

Organisation Type (Any one of below)*

☐ Company ☐ Partnership ☐ Proprietorship ☐ Others

Proof of Organisation (All are Mandatory)* - Can also be attested by Authorized Signatory

Document Name	Company	Partnership	Proprietorship	Others
List of Directors with seal and signature.	<input checked="" type="checkbox"/>			
List of Partners with seal and signature.		<input checked="" type="checkbox"/>		
Attested copy of Organizational PAN Card.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Attested copy of Bank Statement (First 2 pages).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Attested copy of Incorporation Certificate.	<input checked="" type="checkbox"/>			
Attested copy of Article and Memorandum of Association/Rules/By Laws (First 2 pages).	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Attested copy of Last Audit Report and annual return (First 2 pages).	<input checked="" type="checkbox"/>			
Attested copy of Partnership Deed/Trust Deed /LLP Agreement (First 2 pages).		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Attested copy of last ITR (First 2 pages).		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Attested copy of Business Registration certificate			<input checked="" type="checkbox"/>	
Certified copy of Authorized signatory organisation ID Proof.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of IEC Certificate	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

DECLARATION BY APPLICANT

I hereby agree that I have read and understood the provisions of e-Mudhra Certification Practice Statement (CPS) and the subscriber agreement and will abide by the same. The information provided in this form is true & correct to the best of my knowledge. I accept publishing my certificate information in e-Mudhra repository. I am aware of risks associated in case of Class 1 Certificate, when storing the private key on a device other than a FIPS 140-1/2 validated cryptographic module.

Date Place Signature of the applicant
(As in ID proof | Blue Ink Only)

AUTHORIZATION

I hereby authorize the above applicant, on behalf of our Organisation to apply for obtaining the Digital Signature/ Encryption Certificate issued by e-Mudhra

Authorized Signatory (Sign and Seal)

TO BE FILLED BY RA OFFICE ONLY

I declare that the applicant has provided correct information in this application form. I have checked and verified the application form and supporting documents. I hereby take full responsibility for any wrong verification made, or wrong documents submitted for the application.

Date

RA Name, Code & Seal

Signature of RA